## PART B - FEE(S) TRANSMITTAL

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## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 758 7590 03/25/2008 Certificate of Mailing or Transmission FENWICK & WEST LLP I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sulficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. SILICON VALLEY CENTER 801 CALIFORNIA STREET MOUNTAIN VIEW, CA 94041 (Depositor's name (Signature APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/688.575 10/16/2003 J. Elon Graves 23236-07284 2479 TITLE OF INVENTION: COMBINED WAVEFRONT SENSOR AND DATA DETECTOR FOR A FREE SPACE OPTICAL COMMUNICATIONS SYSTEM WITH ADAPTIVE OPTICS APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE

nonprovisional YES \$720 \$300 \$0 \$1020 06/25/2008 EXAMINER ART UNIT CLASS-SUBCLASS PHAN, HANH 2613 398-202000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Fenwick & West LLP (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Campbell, CA AOptix Technologies

Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🖾 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted)

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5. Change in Entity Status (from status indicated above)

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. June 24, 2008

Authorized Signature \_ /Michael W. Farn/ Typed or printed name Michael W. Farn 41,015 Registration No.

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